COLORADO

Website: www.sos.state.co.us/pubs/elections

Link to state election website is also available through FVAP website at www.fvap.gov

Absentee Voting Guide

FOR UNIFORMED SERVICES AND U.S. CITIZENS OVERSEAS

- I. Application Instructions for FPCA
- II. Uniformed Services
 - A. Who Can Do It
 - B. Registering and Requesting an Absentee Ballot
 - C. Casting Your Vote
 - D. Notary/Witness Requirements
 - E. Electronic Transmission of FPCAs and Ballots
 - F. Special Write-In Absentee Ballot
- III. Civilians Outside U.S.
 - A. Who Can Do It
 - B. Registering and Requesting an Absentee Ballot

- C. Casting Your Vote
- D. Notary/Witness Requirements
- E. Electronic Transmission of FPCAs and Ballots
- F. Special Write-In Absentee Ballot
- IV. Uniformed Services & Civilians Outside U.S.
 - A. Bars to Registration and Voting
 - B. Cancellation of Registration
 - C. Action on Registration Requests
 - D. Action If Registration Is Denied
 - E. Where To Send It
 - F. State Special Write-In Labels

COLORADO

The Federal Post Card Application (FPCA) is the primary form for requesting registration and/or an absentee ballot from your local election official. Read all instructions printed below and on the FPCA before completing and signing your application.

FEDERAL POST CARD APPLICATION

Block 4.a.)	I. REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [9] A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [1] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [2] MY INFORMATION (Required) [3] MY INFORMATION (Required) [4] MY INFORMATION (Required) [5] MY INFORMATION (Required) [6] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [7] SOCIAL SECURITY NUMBER [8] G. STATE DRIVER'S LICENSE OR I.D. NUMBER [8] MY INFORMATION (Required) [8] MY INFORMATION (Required) [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] A U.S. CITIZEN RESIDING OUTSID	I. REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [9) A MEMBER OF THE UNIFORNED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [9) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [9] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [1] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [1] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [1] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [1] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [2] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [3] (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [4] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [5] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [6] (a) A	I. REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): (a) A WEMBER OF THE UNIFORMED SERVICES OR REACHAST MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. WY INFORMATION (Required) 1. TYPED OR PRINTED NAME (last, First, Middle) 1. SUFFIX (a), Sx., (b) PREVIOUS NAME (if applicable and the second of the second o	I. REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A US. CITIZEN RESIONS OUTSIDE THE U.S. TEMPORARILY (c) A				
 | | | | | |
 | | | | | | | | | |
 | | | | | | | |
 | | | · . T | | | | |
 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------			
(a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) SUFFIX (Jr. Sr., Indefinitely SUFFIX (Jr. Sr.,	(a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY IN YINFORMATION (Required) ITYPED OR PRINTED NAME (Last, First, Modile) SUFFIX (M. St., L. D. PREVIOUS NAME (I applicable) SEX d. RACE e. DATE OF BIRTH I.S. SOCIAL SECURITY NUMBER M. M. D. D. V. V. V. V. D. D. V. V. V. V. D. D. T. L. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all i	(a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY MYCROMATION (Required) 1. TYPED OR PRINTED NAME (Lass, Fist, Middle) 1. TYPED OR PRINTED NAME (Lass, Fist, Middle) 1. TYPED OR PRINTED NAME (Lass, Fist, Middle) 1. THE PHONE NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include	(a) A MEMBER OF THE UNFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) IN TYPED OR PRINTED NAME (Last, First, Middle) IN TYPED OR PRINTED NAME (Last, First, Middle) IN TYPED OR PRINTED NAME (Last, First, Middle) IN M	(a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CI			
 | RE | GIST | [RA] | ΓΙΟΝ | I AN | ND A
 | ABS | SEN | TEE | B/ | ۱LL | .от | RE | QU | ES | Г - Е
 | ED | ER | AL | РО | ST | CA | RD | AF | P
 | LIC | ,AI | IOI | N (I | FP(| CA) |
 |
| (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORABILY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) 3. TYPED OR PRINTED NAME (last, First, Middle) (c) SEX (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) (d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (e) A U.S. CITIZEN | (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY IN YINFORMATION (Required) ITYPED OR PRINTED NAME (Last, First, Modile) SUFFIX (M. St., L. D. PREVIOUS NAME (I applicable) SEX d. RACE e. DATE OF BIRTH I.S. SOCIAL SECURITY NUMBER M. M. D. D. V. V. V. V. D. D. V. V. V. V. D. D. T. L. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all international profuses) I. FAN NUMBER (No DSN number; include all i | (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY MYCROMATION (Required) 1. TYPED OR PRINTED NAME (Lass, Fist, Middle) 1. TYPED OR PRINTED NAME (Lass, Fist, Middle) 1. TYPED OR PRINTED NAME (Lass, Fist, Middle) 1. THE PHONE NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include all international prefixes) 1. FAN NUMBER (No DSN number; include | (a) A MEMBER OF THE UNFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) IN TYPED OR PRINTED NAME (Last, First, Middle) IN TYPED OR PRINTED NAME (Last, First, Middle) IN TYPED OR PRINTED NAME (Last, First, Middle) IN M | (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S.
CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY (c) A U.S. CI | REQU | JEST AB | SENTE | E BAL | LOTS | FOR A
 | ALL E | LECT | IONS I | N WH | ICH I | AM E | LIGIB | LE T
 | o vo | TE AN | DIA | M (ma | ırk on | ly or | e): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
 | | | | | |
 | | |
| (a) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) 3. TYPED OR PRINTED NAME (Last, First, Middle) 5. SEX | (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SUIFIX (Jr., Str., b. PREVIOUS NAME (It applicable) SUIFIX (Jr., Str., b | CITY, TOWN OR VILLAGE D. STATE Carpitro D. SUFFER EDUCE ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4-b. only # you do not ward your bailor mailed to the address of the property of the property of the property of the property of the address of the property of the property of the property of the address of the property of the address of the property of the | (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) 1. TYPED OR PRINTED NAME (Last, First, Modifie) 3. SUFFIX (K., St., III, III, III, III, III, III, III, I | (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) 3. TYPED OR PRINTED NAME (Last, First, Mode) 3. SEX 4. RACE 5. BATE ORIVER'S LICENSE OR LD. NUMBER 5. SEX 5. SEX 6. DATE OF BIRTH 6. SOCIAL SECURITY NUMBER 6. STATE DRIVER'S LICENSE OR LD. NUMBER 6. STATE DRIVER'S LICENSE OR LD. NUMBER 7. TELEPHONE NUMBER (No DSN number: include all international prefixes) 8. LEVAL ADDRESS 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 9. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefix | | | | | | | | | | | | | | | | | | - | | | • | NT | | | | | | | | | | | |
| [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) 1. TYPED OR PRINTED NAME (Last, Fist, Middle) 3. SEX | (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SUIFIX (Jr., Str., b. PREVIOUS NAME (It applicable) SUIFIX (Jr., Str., b | CITY, TOWN OR VILLAGE D. STATE Carpitro D. SUFFER EDUCE ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4-b. only # you do not ward your bailor mailed to the address of the property of the property of the property of the property of the address of the property of the property of the property of the address of the property of the address of the property of the | (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) 1. TYPED OR PRINTED NAME (Last, First, Modifie) 3. SUFFIX (K., St., III, III, III, III, III, III, III, I | (e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY 2. MY INFORMATION (Required) 3. TYPED OR PRINTED NAME (Last, First, Mode) 3. SEX 4. RACE 5. BATE ORIVER'S LICENSE OR LD. NUMBER 5. SEX 5. SEX 6. DATE OF BIRTH 6. SOCIAL SECURITY NUMBER 6. STATE DRIVER'S LICENSE OR LD. NUMBER 6. STATE DRIVER'S LICENSE OR LD. NUMBER 7. TELEPHONE NUMBER (No DSN number: include all international prefixes) 8. LEVAL ADDRESS 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 8. LANGUAGE (No DSN number: include all international prefixes) 9. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefixes) 1. LANGUAGE (No DSN number: include all international prefix | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. MY INFORMATION (Required) 1. TYPED OR PRINTED NAME (Last, First, Middle) 1. SOCIAL SECURITY NUMBER 3. SUFFIX (Jr., Sr., lil, etc.) 1. SOCIAL SECURITY NUMBER 4. M M D D D Y V V V V D D D D D D D D D D D D | LIVINFORMATION (Required) LIVINFORMATION (Required) LIVINFO OR PRINTED NAME (LBBL First, Middle) LIVINFO OR PRINTED NAME (LBBL First, Middle) LIVINFO OR PRINTED NAME (LBBL First, Middle) LIVINFO OR VILLAGE LIVINFORMATION (Required) LIVINFORMATION (Requ | LIYYED OR PRINTED NAME (Last, First, Middle) SUFFIX (Jr., Sr., b. PREVIOUS NAME (if applicable and the state of the state | ENVINFORMATION (Required) 1. TYPED OR PRINTED NAME (Last, First, Middle) SUFFIX (Jr., Sr., Ib., PREVIOUS NAME (it applicable) SUFFIX (Jr., Sr., Ib., Sr., Ib., Ib., Ib., Ib., Ib., Ib., Ib., Ib | 2. MY INFORMATION (Required) 2. TYPED OR PRINTED NAME (Last, First, Middle) 3. SUFFIX (&, Sr., b. PREVIOUS NAME (if applicable and international prefixes) 3. SEX | (b) A | U.S. CI112 | EN KE | SIDING | 00151 | DE THE | E U.S. | IEMP | ORAKI | LY | | | | | | | | | | | | | | | | | | | | | | | |
| B. SEX DATE OF BIRTH IS SOCIAL SECURITY NUMBER OF STATE OF BIRTH OF SOCIAL SECURITY NUMBER OF STATE DRIVER'S LICENSE OR LD. NUMBER B. SEX DATE OF BIRTH OF SOCIAL SECURITY NUMBER OF STATE DRIVER'S LICENSE OR LD. NUMBER B. STATE DRIVER'S LICENSE OR LD. NUMBER (No DSN number; include all international prefixee) I. FAX NUMBER (No DSN number; include all international prefixee) I. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international prefixee) J. FAX NUMBER (No DSN number; include all international pr | L TYPED OR PRINTED NAME (Last, Frst, Middle) SUFFIX (Jr., Sr., Ill, etc.) A RAGE e. DATE OF BIRTH I. SOCIAL SECURITY NUMBER G. STATE DRIVER'S LICENSE OR I.D. NUMBER J. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all international prefixes) L. FAX NUMBER (No DSN number: include all in | L TYPED OR PRINTED NAME (Last, First, Middle) SUFFIX (Jr., Sir., Ib., PREVIOUS NAME (if applicable) II. SOCIAL SECURITY NUMBER G. STATE DRIVER'S LICENSE OR I.D. NUMBER II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) EMAIL ADDRESS EMAIL ADDRESS II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international prefixes) II. FAX NUMBER (No DSN number; include all international pre | SUFFIX (M., St., SEX | L TYPED OR PRINTED NAME (Last, First, Middle) SUFFIX (J., St., B., PREVIOUS NAME (if applicable) SUFFIX (J., St., B., B., St., B., B., B., B., B., B., B., B., B., B | (c) A
 | U.S. CITIZ | EN RES | SIDING | OUTSII | DE THE | E U.S.
 | INDEF | INITEL | Υ. | | | | | |
 | | | | | | | | |
 | | | | | | |
 | |
| S. SEX | SEX | SEX A. RACE e. DATE OF BIRTH 1. SOCIAL SECURITY NUMBER 9. STATE DRIVER'S LICENSE OR I.D. NUMBER | SEX | SEX
 | MY INI | ORMATI | ON (Re | equired | i) | | | | | |
 | | | | | | | |
 | | | | | | | | | | |
 | | | | | |
 | | |
| C. SEX | SEX | SEX A. RACE e. DATE OF BIRTH 1. SOCIAL SECURITY NUMBER 9. STATE DRIVER'S LICENSE OR I.D. NUMBER | SEX | SEX
 | TYPED | OR PRIN | TED NA | ME (Las | st, First, | Middle
 | e) | | | | | | |
 | | | | | , | | | Sr., | b. Pf | REVIO | US N
 | AME | (if ap | plica | ble) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
 | | |
| TELEPHONE NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; inc | TELEPHONE NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number; include all international prefixes) LEAX NUMBER (No DSN number | TELEPHONE NUMBER (No DSN number: include all international prefixes) LEANIL ADDRESS LEMAIL ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) LEMAIL ADDRESS LEMAIL ADDRESS LEMAIL ADDRESS LEMAIL ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) LEMAIL ADDRESS LEMAIL ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) LEMAIL ADDRESS LEMAIL ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) LEMAIL ADDRESS (Where live now) (Required) LEMAIL ADDRESS (Where live n | TELEPHONE NUMBER (No DSN number; include all international prefixes) LEMAIL ADDRESS LEMAIL ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) LEMAIL ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) LEMAIL ADDRESS (Where I live now) (Required) | TELEPHONE NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixe | 1 1 | \perp | 1 | 1 1 | 1 1 | | 1 | 1 1 | | 1 | 1 1 | 1 | 1 | 1 | 1 | | 1 | 1 | | 111, 6 | (6.) | 1 | li | Ī | | 1 | | Ī | 4 | | Ī | Ī | ĺ |
| T. TELEPHONE NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; | TELEPHONE NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixe | TELEPHONE NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; inc | THELEPHONE NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; in | I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international
prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; includ | SEX | | d. R | ACE | e. D | ATE OF
 | F BIRT | TH | | | f. SC | OCIAL | SECU | IRITY
 | NUME | BER | | | 9 | g. STA | TE DI | RIVER | 'S LIC | ENS | ORI
 | .D. N | IUMBI | ER | | |
 | | |
| T. TELEPHONE NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; | TELEPHONE NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixes) L FAX NUMBER (No DSN number; include all international prefixe | TELEPHONE NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; include all international prefixes) L. FAX NUMBER (No DSN number; inc | THELEPHONE NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; in | I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international
prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; include all international prefixes) I. FAX NUMBER (No DSN number; includ | Ім Г | ٦. | | | |
 | 1 | 1 1 | | 1 | ١, | ı | 1_ | . 1
 | 1 1 | _ | | | B | | 1 | ı | | ı | ı
 | ı | 1 | ı | | | 1
 | | ı |
| B. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) 3. NUMBER AND STREET (Cannot be a P.O. Box) 4. WHERE TO SEND MY VOTING MATERIALS 5. MY CURRENT ADDRESS (Where I live now) (Required) 5. MY FORWARDING ADDRESS (Complete 4 b. only if you do not want your ballot mailed to the act Block 4.a.) | EMAIL ADDRESS J. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) NUMBER AND STREET (Cannot be a P.O. Box) J. WHERE TO SEND MY VOTING MATERIALS MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | EMAIL ADDRESS I. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) I. NUMBER AND STREET (Cannot be a P.O. Box) I. WHERE TO SEND MY VOTING MATERIALS I. MY CURRENT ADDRESS (Where I live now) (Required) I. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the addrest Block 4.a.) I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: I. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | EMAIL ADDRESS B. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) NUMBER AND STREET (Cannot be a P.O. Box) WHERE TO SEND MY VOTING MATERIALS WHY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | EMAIL ADDRESS 3. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) 3. NUMBER AND STREET (Cannot be a P.O. Box) 4. STATE (a. ZIP CODE) 4. STATE (a. ZIP CODE) 5. MY FORWARDING ADDRESS (Where I live now) (Required) 5. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address block 4.a.) 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary (elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | | | ADED (| | | | | | | |
 | | | YY | / Y | Ш | | |
 | | · 541/ | |) (A | | | Щ | <u> </u> | | |
 | | Ų. | | | |
 | | |
| 3. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) a. NUMBER AND STREET (Cannot be a P.O. Box) b. CITY, TOWN OR VILLAGE c. COUNTY d. STATE e. ZIP CODE 4. WHERE TO SEND MY VOTING MATERIALS a. MY CURRENT ADDRESS (Where I live now) (Required) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.) | I. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) I. NUMBER AND STREET (Cannot be a P.O. Box) I. CITY, TOWN OR VILLAGE I. CITY, TOWN OR VILLAGE C. COUNTY D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | I. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) I. NUMBER AND STREET (Cannot be a P.O. Box) I. WHERE TO SEND MY VOTING MATERIALS I. MY CURRENT ADDRESS (Where I live now) (Required) I. WHERE TO SEND MY VOTING MATERIALS I. MY CURRENT ADDRESS (Where I live now) (Required) I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO VOTE in primary | B. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) b. NUMBER AND STREET (Cannot be a P.O. Box) c. CITY, TOWN OR VILLAGE c. COUNTY d. STATE e. ZIP CODE d. WHERE TO SEND MY VOTING MATERIALS b. MY CURRENT ADDRESS (Where I live now) (Required) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL FAX EMAI | 3. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) 3. NUMBER AND STREET (Cannot be a P.O. Box) 4. STATE e. ZIP CODE 5. MY CURRENT ADDRESS (Where I live now) (Required) 5. MY CURRENT ADDRESS (Where I live now) (Required) 6. IN Y FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) 6. IN Y FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) 6. IN Y POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 8. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 8. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the | ELEPH
 | IONE NUI | MBEK (I | No DSN | numbe | er; inclu | de all i
 | interna | tional p | retixes | 5) | | | | | ı. FAX | NUME
 | SER (N | IO DSN | N num | ber; ır | clude | all inte | ernati | onal pi
 | refixe | es) | | | | | |
 |
3. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) a. NUMBER AND STREET (Cannot be a P.O. Box) b. CITY, TOWN OR VILLAGE c. COUNTY d. STATE e. ZIP CODE 4. WHERE TO SEND MY VOTING MATERIALS a. MY CURRENT ADDRESS (Where I live now) (Required) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.)	I. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) I. NUMBER AND STREET (Cannot be a P.O. Box) I. CITY, TOWN OR VILLAGE I. CITY, TOWN OR VILLAGE C. COUNTY D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY:	I. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) I. NUMBER AND STREET (Cannot be a P.O. Box) I. WHERE TO SEND MY VOTING MATERIALS I. MY CURRENT ADDRESS (Where I live now) (Required) I. WHERE TO SEND MY VOTING MATERIALS I. MY CURRENT ADDRESS (Where I live now) (Required) I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: II PREFER TO VOTE in primary	B. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) b. NUMBER AND STREET (Cannot be a P.O. Box) c. CITY, TOWN OR VILLAGE c. COUNTY d. STATE e. ZIP CODE d. WHERE TO SEND MY VOTING MATERIALS b. MY CURRENT ADDRESS (Where I live now) (Required) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL FAX EMAI	3. MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) 3. NUMBER AND STREET (Cannot be a P.O. Box) 4. STATE e. ZIP CODE 5. MY CURRENT ADDRESS (Where I live now) (Required) 5. MY CURRENT ADDRESS (Where I live now) (Required) 6. IN Y FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) 6. IN Y FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) 6. IN Y POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 8. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 8. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other consults and the				
 | | | | | |
 | | | | | | | | | |
 | | | | | | | |
 | | | | | | | |
 |
| a. NUMBER AND STREET (Cannot be a P.O. Box) D. CITY, TOWN OR VILLAGE C. COUNTY D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.) | D. CITY, TOWN OR VILLAGE C. COUNTY D. WHERE TO SEND MY VOTING MATERIALS D. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) A PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MAIL FAX EMAIL | LOUTY, TOWN OR VILLAGE C. COUNTY D. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) LI PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | I. NUMBER AND STREET (Cannot be a P.O. Box) D. CITY, TOWN OR VILLAGE C. COUNTY D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the addrest Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the addrest Block 4.a.) D. HPREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | S. NUMBER AND STREET (Cannot be a P.O. Box) S. CITY, TOWN OR VILLAGE S. WHERE TO SEND MY VOTING MATERIALS S. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) S. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL FAX EMAIL FAX EMAIL FAX FAX EMAIL FAX | MAIL A
 | DDRESS | | | | | | | | |
 | | | | | | | | | |
 | | | | | | | |
 | | | | | | | |
 |
a. NUMBER AND STREET (Cannot be a P.O. Box) D. CITY, TOWN OR VILLAGE C. COUNTY D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.)	D. CITY, TOWN OR VILLAGE C. COUNTY D. WHERE TO SEND MY VOTING MATERIALS D. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) A PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MAIL FAX EMAIL	LOUTY, TOWN OR VILLAGE C. COUNTY D. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) LI PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary	I. NUMBER AND STREET (Cannot be a P.O. Box) D. CITY, TOWN OR VILLAGE C. COUNTY D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the addrest Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the addrest Block 4.a.) D. HPREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections):	S. NUMBER AND STREET (Cannot be a P.O. Box) S. CITY, TOWN OR VILLAGE S. WHERE TO SEND MY VOTING MATERIALS S. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) S. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL FAX EMAIL FAX EMAIL FAX FAX EMAIL FAX				
 | | | | | |
 | | | | | 1 | | | | |
 | | | | 1 | | | |
 | İ | | | | | | |
 |
| a. NUMBER AND STREET (Cannot be a P.O. Box) D. CITY, TOWN OR VILLAGE C. COUNTY D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.) | D. CITY, TOWN OR VILLAGE C. COUNTY D. WHERE TO SEND MY VOTING MATERIALS D. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) A PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MAIL FAX EMAIL | LOUTY, TOWN OR VILLAGE C. COUNTY D. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) LI PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | I. NUMBER AND STREET (Cannot be a P.O. Box) D. CITY, TOWN OR VILLAGE C. COUNTY D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the addrest Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the addrest Block 4.a.) D. HPREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | S. NUMBER AND STREET (Cannot be a P.O. Box) S. CITY, TOWN OR VILLAGE S. WHERE TO SEND MY VOTING MATERIALS S. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) S. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL FAX EMAIL FAX EMAIL FAX FAX EMAIL FAX | MY VO
 | TING RE | SIDEN | CE AD | DRES | S (For | milita
 | arv. us | se lega | l resid | dence | . For | overs | seas | citize | ns. us | e last
 | legal | resid | ence | in U. | S.) (R | eauir | ed) |
 | !_ | | | | | | 1 |
 |
| 4. WHERE TO SEND MY VOTING MATERIALS a. MY CURRENT ADDRESS (Where I live now) (Required) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act Block 4.a.) | B. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) D. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | J. WHERE TO SEND MY VOTING MATERIALS I. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | J. WHERE TO SEND MY VOTING MATERIALS 1. MY CURRENT ADDRESS (Where I live now) (Required) 1. MY CURRENT ADDRESS (Where I live now) (Required) 1. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) 1. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 1. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 1. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | 4. WHERE TO SEND MY VOTING MATERIALS 3. MY CURRENT ADDRESS (Where I live now) (Required) 4. WHERE TO SEND MY VOTING MATERIALS 5. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 6. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 6. ADDITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | | | | | | •
 | | | | | | | | | | |
 | | , | | 3 | | | | , (| | , |
 | | | | | |
 | | |
| WHERE TO SEND MY VOTING MATERIALS MY CURRENT ADDRESS (Where I live now) (Required) | B. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) D. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | J. WHERE TO SEND MY VOTING MATERIALS I. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | J. WHERE TO SEND MY VOTING MATERIALS 1. MY CURRENT ADDRESS (Where I live now) (Required) 1. MY CURRENT ADDRESS (Where I live now) (Required) 1. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) 1. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 1. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 1. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | 4. WHERE TO SEND MY VOTING MATERIALS 3. MY CURRENT ADDRESS (Where I live now) (Required) 4. WHERE TO SEND MY VOTING MATERIALS 5. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 6. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 6. ADDITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | 1 1 | 1.1 | 1 | 1 1 | 1 1 |
 | ı | 1 1 | | ı | 1 1 | ı | ı | ı
 | 1 | | ı | 1 | | 1 | ı | ı | 1 1 | ı | ı
 | ı | ı | ı | ı | ı | ı
 | ı | ı |
| S. WHERE TO SEND MY VOTING MATERIALS II. MY CURRENT ADDRESS (Where I live now) (Required) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the act block 4.a.) | B. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) D. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | J. WHERE TO SEND MY VOTING MATERIALS I. MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: D. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | J. WHERE TO SEND MY VOTING MATERIALS 1. MY CURRENT ADDRESS (Where I live now) (Required) 1. MY CURRENT ADDRESS (Where I live now) (Required) 1. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) 1. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 1. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 1. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | 3. MY CURRENT ADDRESS (Where I live now) (Required) 4. MY CURRENT ADDRESS (Where I live now) (Required) 5. LPREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 6. LPREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | TITY TO | OWN OR Y | /II I AGI | | |
 | | | | | | | | C (
 | COLIN | TV | | | | | | | | | d
 | STA | TF 6 | o 715 | COL |)F |
 | | |
| b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the ad Block 4.a.) | b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: c. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL | b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: c. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): c. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 |) | JWN OK | VILLAGI
I | | |
 | | | $oldsymbol{\Theta}$ | | | | | 0. 1
 | L | | | , | | | | | | | u.
 | . 317 | 112 | c. ZIF | I | , L |
 | | 1 |
| b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the ad Block 4.a.) | b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: c. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL | b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) b. MY FORWARDING ADDRESS (Complete 4.b. only if you do not want your ballot mailed to the address Block 4.a.) c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: c. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): c. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
 | | | | | | | |
 | | | | | | | | | | |
 | | | | | |
 | | |
| Block 4.a.) | Block 4.a.) | Block 4.a.) | Block 4.a.) D HAIL FAX EMAIL S. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | Block 4.a.) Block | WHER | E TO SE | ND MY | VOTIN | G MAT | ΓERIAI | LS | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D MAIL FAX EMAIL PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | I. PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL FAX EMAIL FAX EMAIL FAX FAX EMAIL FAX F | 2. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL FAX EMAIL S. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | 5. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL | NY CUI | RRENT AD | DRESS | (Where | e I live r | now) (R | Require | ed) | | | | | | | | | | | NG AE | DRE | SS (C | mple | e 4.b. | only | f you | do no | ot wan | nt you | ır ballı | ot ma | iled to | the a | ddres |
| 2. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | 1 1 | 1.1 | 1 | 1 1 | 1 1 | 1
 | 1 | 1 1 | | 1 | 1 1 | 1 | 1 | 1
 | 1 | Bloc | k 4.a.) | 1 | ı | 1 | 1 | I | 1 1 | ı | ı
 | 1 | ı | ı | ı | ı | 1
 | 1 | l |
| .1 PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | | | | | | | | | | |
 | | | | | | | |
 | | | | | | | | | | |
 | | | | | |
 | | |
| .1 PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | | | | | |
 | 1 | 1 4 | a | ı | 1 1 | ı | | ı
 | | ı | ı | ı | | | ı | ı | | ı | ı
 | ı | ı | ı | ı | ı |
 | | ı |
| . I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | | . MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | 1 1 | 1 1 | ı | 1 1 | 1 1 | | | | | |
 | | | | | | | |
 | | | | | | | | | | |
 | | | | | |
 | | |
| . I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | | . MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | | | | | | | | | | |
 | | | ש | | | | |
 | | | | | | | | | | |
 | | | | | |
 | | |
| . I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | <u> </u> | | | | | | | | | |
 | | | ٠ | | | | |
 | | | <u> </u> | <u> </u> | | | | | | |
 | | i | | | |
 | | |
| . I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | | | | | |
 | | | | | | | | <u> </u>
 | | | | <u> </u> | | | | | | |
 | | | | | |
 | | |
| . I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: | | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | | | | | |
 | | | | | | | 1 | <u></u>
 | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
 | | | | | |
 | | |
| Control of the Contro | | i. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): | 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections): 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth | | | | | | | | | | | | | 1 | | | | | <u> </u> | | 1 | | <u> </u> | | | | <u> </u>
 | | <u> </u> | <u> </u>
 | | <u> </u> | | <u> </u>
 |
| | NV POLITICAL PARTY PREFERENCE (Garleys I but you be applied by state to applicable out in advance) | | elections): | elections): 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | DREEF | | CEIVE | MY ABS | L L | BALLO
 | | L PERM | | I BY M | L L | I B | | | | |
 | | | | <u> </u>

 | | |

 | | | |
 |

 | ΕΔΥ | | | |
 | 1 FM |
 |
| 5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to yote in primary | A MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in Drimary | | elections): | elections): 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth
 | PREFE | ER TO RE | CEIVE | MY ABS | | BALLO
 | OT, AS | PERM | MITTED | BY M | Y STA | TE, B | |
 | | | | <u> </u> | |

 |

 M/ | L | | |

 |

 - | FAX | | | |

 |] EM/ | AIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | ADDITIONAL INFORMATION (Designate the period for which you want to proceed by the building of | | | | | | | | | | | | | | | to rec | | | te in p | prima | | |]
M | ML | | | |

 - | FAX | | | | |] EM/ | AIL |
| ADDITIONAL INFORMATION (Projugate the project for which was well to be for the built to be for the built for the b | | | ADDITIONAL INFORMATION (Designate the period for which you want to receive pallots — see instructions for Block 6 paragraph (3). Consult the voting Assistance Guide for oth | | MY PO | LITICAL | | | | | | | | | | | | to reg | | | te in p | primai | | |

 | | | | |

 | =AX | | | | |] EM/ | AIL |
| s. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the voting Assistance Guide for specific state instructions.) | 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth | | |
 | MY PO | LITICAL
ns):
IONAL IN | PARTY | / PREF | EREN | CE (O
 | ptiona | al, bu | t may l | be req | quired | by s | tates (| | | |
 | gister | to vo | | | G |) | | | aph (3 |
 |
 | | | ng A | ssist | tance |
 | | |
| | 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth | | |
 | MY PO | LITICAL
ns):
IONAL IN | PARTY | / PREF | EREN | CE (O
 | ptiona | al, bu | t may l | be req | quired | by s | tates (| | | |
 | gister | to vo | | | G |) | | | l l |
 |
 | | | ng A | ssist | l |
 | | |
| | 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth | | |
 | MY PO | LITICAL
ns):
IONAL IN | PARTY | / PREF | EREN | CE (O
 | ptiona | al, bu | t may l | be req | quired | by s | tates (| | | |
 | gister | to vo | | | G |) | | | pph (3 |
 |
 | | | ng A | ssist | l |
 | | |
| | 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth | | © | G
 | MY PO | LITICAL
ns):
IONAL IN | PARTY | / PREF | EREN | CE (O
 | ptiona | al, bu | t may l | be req | quired | by s | tates (| | | |
 | gister | to vo | | | G |) | | | l l |
 |
 | | | ng A | ssist | l |
 | | |
| | 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth | | © | •
 | MY PO | LITICAL
ns):
IONAL IN | PARTY | / PREF | EREN | CE (O
 | ptiona | al, bu | t may l | be req | quired | by s | tates (| | | |
 | gister | to vo | | | G |) | | | l l |
 |
 | | | ng A | ssist | l |
 | | |
| | 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for oth | | © | ©
 | MY PO | LITICAL
ns):
IONAL IN | PARTY | / PREF | EREN | CE (O
 | ptiona | al, bu | t may l | be req | quired | by s | tates (| | | |
 | gister | to vo | | | G |) | | | aph (3 |

 |
 | | | l l | ssist | l |
 | | |
| specific state instructions.) | 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.) | specific state instructions.) | © | . AFFIRMATION (required)
 | MY PC
electio
ADDIT
specifi | LITICAL
ns):
IONAL IN
c state ir | PART) IFORM Istructi | PREF | EREN | CE (O
 | ptiona | al, bu | t may l | be req | quired | by s | tates (| | | |
 | gister | to vo | | | G |) | | | l l l |
 |
 | | | l l | ssist | L |
 | | |
| 7. AFFIRMATION (required) Is wear or affirm, under penalty of perjury, that: | ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.) C. AFFIRMATION (required) Swear or affirm, under penalty of perjury, that: | Z. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: | 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: | swear or affirm, under penalty of perjury, that:
 | MY PO
election
ADDIT
specifi | LITICAL ns): IONAL IN c state ir | PARTY
IFORM
instruction | ATION ions.) | (Desig | CE (O
 | ptiona | al, but | for wh | be req | quired | nt to | receiv | re bal
 | gister | to voi | instru | iction | s for | Bloc | k 6 pa | ragra | | | nsulf
 | t the | Votin | | | | Guid
 | le for | r oth |
| 7. AFFIRMATION (required) I swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S. citizen temp | 5. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.) 7. AFFIRMATION (required) 9. Swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re- | AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re | 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re | swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re
 | AFFIR year or . I am a | LITICAL ns): IONAL IN c state ir MATION affirm, und | IFORM
Instruction | ATION ions.) | (Desig | CE (O
 | ptiona | al, but | for wh | be req | quired | nt to | receiv | re bal
 | gister | to voi | instru | iction | s for | Bloc | k 6 pa | ragra | | | nsulf
 | t the | Votin | | | | Guid
 | le for | r oth | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. AFFIRMATION (required) I swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., and 2. I am a U.S. citizen temporarily residing outside the U.S., and | AAFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen recouside the U.S., and | F. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen reoutside the U.S., and 2. I am a U.S. citizen at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and | 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and | swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and | AFFIR wear or . I am a | MATION affirm, und member r. member r. met U.S., at U.S. citiz | (requireder penalof the United on the United | PREFINATION ions.) ed) alty of peniformed ast 18 y | (Designment) (Designment) (Designment) | gnate t | ptiona the pe | al, but | for wh | ich yo | duty or | an eli | receiv | re bal | llots - | - see | instru | iction | s for | Blocc
Blocc | k 6 pa | ragra | temp | orarily | nsult | t the | Votin | | | | Guid | le for | r oth |
| 7. AFFIRMATION (required) Is wear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and | A. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.) 7. AFFIRMATION (required) Swear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen resoutside the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and | **C. AFFIRMATION (required) **swear or affirm, under penalty of perjury, that: 1.1 and a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and | 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and | swear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and | AFFIR vear or . I am a utside t a . I have | MATION affirm, und member of he U.S., a citize | (requireder penalof the Under penalof the Under penalof the Convicted convicted convicted the Convic | ed) alty of peniformed ast 18 yed of a fe | (Design (Desig | gnate to | ptiona the pe | al, but | for wh | active of the economic or been | duty or lection en adju | an eli | receiv | re bal | llots - | - see | instru | iction | s for | Blocc
Blocc | k 6 pa | ragra | temp | orarily | nsult | t the | Votin | | | | Guid | le for | r oth |
| 7. AFFIRMATION (required) Is swear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen to utside the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a telony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4.1 am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and | AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1.1 and a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen resoutside the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4.1 am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and | AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I an a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen results the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and | 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and | swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen reoutside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and | MY PC electio ADDIT specifi AFFIR AFFIR Utside t I am a Utside t I am a I have I am a | MATION affirm, und member he U.S., a t U.S. citiz not been of register nature an | (requireder penalof the Under, at leconycitering, required date b | ed) ast 18 yed of a fue uesting selow into | (Designation of the state of th | cce (O) gnate 1 gnate 1 ges or n age (or other or other o | ptiona the pe | al, but | t may I | active of the e or bee | duty or lection in the | an eli | receiv | re bal | llots - | - see | instru | iction | s for | Blocc
Blocc | k 6 pa | ragra | temp | orarily | nsult | t the | Votin | | | | Guid | le for | r oth |
| 7. AFFIRMATION (required) Is wear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4.1 am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. | A. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.) 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other | **C. AFFIRMATION (required) **swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen resultside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. | 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. | swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen reoutside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. | AFFIR AFFIR LIAM 1 A MARKET AND | MATION affirm, uno the U.S., a U.S. citiz not been or register afformation formation | (requireder penalof the Unideen, at leaconvictering, required on this it.) | ed) att 18 yed of a fe uesting selow incomist | (Designation of the control of the c | cce (O) gnate t mat: mes or n age (or other or | ptiona mercha r will be disqua ing in a | al, but | for wh | active of the electric or beed diction ment, a knowle | duty or lection and in the lection and juind ledge. | an eligible and eligible and eligible u.s., | receiving in the state of the s | spouse | e or de | - see | instru
nt of su | uction | s for | Blocc
Blocc | k 6 pa | ragra | temp | orarily | nsult | t the | Votin | | | | Guid | le for | r oth |
| 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen toutside the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4.1 am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and | A. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.) 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other U.S. citizen temporarily residing outside the U.S., or other | **C. AFFIRMATION (required) **swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen resultside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. | 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. | swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen reoutside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. | AFFIR AFFIR LIAM 1 A MARKET AND | MATION affirm, uno the U.S., a U.S. citiz not been or register afformation formation | (requireder penalof the Unideen, at leaconvictering, required on this it.) | ed) att 18 yed of a fe uesting selow incomist | (Designation of the control of the c | cce (O) gnate t mat: mes or n age (or other or | ptiona mercha r will be disqua ing in a | al, but | for wh | active of the electric or beed diction ment, a knowle | duty or lection and in the lection and juind ledge. | an eligible and eligible and eligible u.s., | receiving in the state of the s | spouse | e or de | - see | instru
nt of su | uction | s for | Blocc
Blocc | k 6 pa | ragra | temp | orarily | nsult | t the | Votin | | | | Guid | le for | r oth |
| 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen outside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. | A. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots — see instructions for Block 6 paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.) 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen revolution the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury. Signed: Date: Date: Date: | **C. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1.1 am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2.1 am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3.1 have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4.1 am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury. Signed: Date: Date: Date: | 7. AFFIRMATION (required) swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen re outside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury. Signed: Date: Date: Date: Date: | swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen reoutside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury. Signed: Date: Date: Date: | AFFIR vear or u. I am a utside t I am a . I ham a . I ha | MATION affirm, uno the U.S., a U.S. citiz not been or register afformation formation | (requireder penalof the Unideen, at leaconvictering, required on this it.) | ed) att 18 yed of a fe uesting selow incomist | (Designation of the control of the c | cce (O) gnate t mat: mes or n age (or other or | ptiona mercha r will be disqua ing in a | al, but | t may lifer wh | active of the ediction ment, a w knowledge. | duty or lection en adjul in the ledge. | an eli | receive receive receive receive significant receive receive significant receivers received and received receive | ppouse vote ir tally ir | e or de | - see | nt of subdiviries on of p | uction | s for | Blocc
Blocc | k 6 pa | ragra | temp | orarily | nsult | t the | Votin | | | | Guid | le for | r oth |
| с. І | | j. | 5. | 5. 1 | | (a) A (b) A (c) A (d) A (d) A (e) A (e) A (f) A | I REQUEST AB I (a) A MEMBER I (b) A U.S. CITIZ I (c) A U.S. CITIZ MY INFORMATI TYPED OR PRIN SEX I M F TELEPHONE NUI EMAIL ADDRESS MY VOTING RE NUMBER AND ST CITY, TOWN OR V | I REQUEST ABSENTE (a) A MEMBER OF THE (b) A U.S. CITIZEN RES MY INFORMATION (RE TYPED OR PRINTED NA SEX d. F TELEPHONE NUMBER (I) EMAIL ADDRESS MY VOTING RESIDEN NUMBER AND STREET (I) CITY, TOWN OR VILLAGI WHERE TO SEND MY | I REQUEST ABSENTEE BAL (a) A MEMBER OF THE UNIFO (b) A U.S. CITIZEN RESIDING MY INFORMATION (Required TYPED OR PRINTED NAME (Las MY LOTING RESIDENCE AD MY VOTING RESIDENCE AD NUMBER AND STREET (Cannot CITY, TOWN OR VILLAGE WHERE TO SEND MY VOTING WHERE TO SEND MY VOTING (b) A U.S. CITIZEN RESIDING MY VOTING RESIDENCE AD CITY, TOWN OR VILLAGE | I REQUEST ABSENTEE BALLOTS [a) A MEMBER OF THE UNIFORMED [b) A U.S. CITIZEN RESIDING OUTSI [c) A U.S. CITIZEN RESIDING | I REQUEST ABSENTEE BALLOTS FOR A (a) A MEMBER OF THE UNIFORMED SERV (b) A U.S. CITIZEN RESIDING OUTSIDE THE (c) A U.S. CITIZEN RESIDING OUTSIDE THE MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle SEX (d. RACE (e. DATE O M M M M TELEPHONE NUMBER (No DSN number; inclusted inclusion i | I REQUEST ABSENTEE BALLOTS FOR ALL E (a) A MEMBER OF THE UNIFORMED SERVICES (I) (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX | I REQUEST ABSENTEE BALLOTS FOR ALL ELECT [(a) A MEMBER OF THE UNIFORMED SERVICES OR ME] (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMP] (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDER MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS I (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHAI (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARI (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITEL MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WH [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MA [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX [d. RACE] [a. DATE OF BIRTH [m. M] REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE (II) (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM E (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON AC (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX | I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIE (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX d. RACE e. DATE OF BIRTH f. SOCIAL SECUTE TELEPHONE NUMBER (No DSN number; include all international prefixes) MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For oversell the property of the pr | I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE T [(a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY [(b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [(c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VO [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR A [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX [A] RACE [B] DATE OF BIRTH [I] SOCIAL SECURITY NUMBER [M] M [M] F [TELEPHONE NUMBER (No DSN number; include all international prefixes) [EMAIL ADDRESS MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citize) NUMBER AND STREET (Cannot be a P.O. Box) [I] WHERE TO SEND MY VOTING MATERIALS | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AN [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIG [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX [d. RACE] [e. DATE OF BIRTH] [f. SOCIAL SECURITY NUMBER] MM [g. D] TELEPHONE NUMBER (No DSN number; include all international prefixes) [i. FAX] MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use numbers and Street (Cannot be a P.O. Box) [city, Town or VILLAGE] WHERE TO SEND MY VOTING MATERIALS MY CURRENT ADDRESS (Where I live now) (Required) [b. MY CURRENT ADDRESS (Where I live now) (Required) | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I A [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX [d. RACE | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mail and a member of the uniformed services or merchant marine on active duty, or an eligible spoud (b) a u.s. citizen residing outside the u.s. temporarily (c) a u.s. citizen residing outside the u.s. indefinitely (my information (required)) Typed or printed name (last, first, Middle) SEX | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark or a land) and (mark or a | IREQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only on a mark on a m | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDE [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [d) A U.S | I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SUFFIX (Jr., Sr., III, etc.) J M | I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SUFFIX (Jr., Sr., Ib. PF III, etc.) MM | I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX [a] A RACE [b] D Y Y Y Y Y [c] A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY WOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY WOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) WHERE TO SEND MY VOTING MATERIALS MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only in the control of | I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): a) (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT b) (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY c) (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX J. RACE J. M. M. D. D. Y. | I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): a) (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT b) (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY c) (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX d. RACE e. DATE OF BIRTH f. SOCIAL SECURITY NUMBER g. STATE DRIVER'S LICENSE OR I.D. N TELEPHONE NUMBER (No DSN number; include all international prefixes) MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY WOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY WOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY WOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY WOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) MY WOTING RESIDENCE ADDRESS (Where live now) (Required) | I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): a) (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT b) (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY c) (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX d. RACE e. DATE OF BIRTH f. SOCIAL SECURITY NUMBER g. STATE DRIVER'S LICENSE OR I.D. NUMBER TELEPHONE NUMBER (No DSN number; include all international prefixes) MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) NUMBER AND STREET (Cannot be a P.O. Box) WHERE TO SEND MY VOTING MATERIALS MY CURRENT ADDRESS (Where I live now) (Required) D. MY FORWARDING ADDRESS (Complete 4.b. only if you do not was | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [(a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [(b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [(c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) (a) A RACE (a) DATE OF BIRTH (b) DEPENDENT (c) DATE OF BIRTH (c) DATE OF | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [(a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [(b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [(c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) [(d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) [(d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) [(d) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) [(e) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY [(f) A U.S. CITIZEN RESIDING OUTSIDE THE | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [a) A MEMBER OF THE UNFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SUFFIX (Jr., Sr., III, etc.) III, etc.) J. FAX NUMBER (No DSN number; include all international prefixes) J. FAX NUMBER (No DSN number; include all international prefixes) MY VOTING RESIDENCE ADDRESS (For military, use legal residence. For overseas citizens, use last legal residence in U.S.) (Required) NUMBER AND STREET (Cannot be a P.O. Box) WHERE TO SEND MY VOTING MATERIALS MY CURRENT ADDRESS (Complete 4.b. only if you do not want your ballot mass of the control | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SEX [A] A RACE [B] DATE OF BIRTH [C] SUFFIX (Jr., Sr., b. PREVIOUS NAME (if applicable) SEX [A] A RACE [B] M [D] D [V V V V V V V V V V V V V V V V V V | REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (mark only one): [a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT [b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY [c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY MY INFORMATION (Required) TYPED OR PRINTED NAME (Last, First, Middle) SUFFIX (Jr., Sr., b. PREVIOUS NAME (if applicable) SEX |

Circled letters on the form above correspond to the instructions on the following page. You must complete all shaded areas.

I. APPLICATION INSTRUCTIONS FOR FPCA

- A If you have changed your name since the last time you registered or voted, write your previous name in Item 2.b.
- B The last four digits of your Social Security number or your Colorado Driver's License number are required for voter registration. If you do not possess either of these identifications, the State shall assign a number that will serve to identify you for voter registration purposes.
- Provide the complete street address of your Colorado voting residence. A post office box is not sufficient. If your address includes a rural route, describe its location in Block 6. For example: "on Highway ______, 2 miles past Highway ______, across the street from the _____ gas station." This address must be different from the one provided in Block 4 and must be within the county where you claim legal voting residence.
- Print the complete address where you want your ballot sent usually your current mailing address. Your current mailing address must be different from the address you provided in Block 3.
- See Section II.E. or III.E.
- If you do not list a party affiliation, you cannot vote in primary elections. You must indicate your political party affiliation when applying for a primary ballot (Example: Democrat, Republican) or write "none" in Block 5 of the FPCA. Political party affiliation is not required if only requesting absentee ballots for general elections. If you have previously declined to indicate a political party and you now want to vote in a primary election, you must submit a completed FPCA which includes your new political party affiliation to the local election official not later than 29 days before the election.
- **G** Indicate if you are a native-born or naturalized citizen.
- You must sign and date the FPCA. When signing, you are swearing or affirming that the information is true and correct.

II. UNIFORMED SERVICES

A. Who Can Do It

These procedures apply to persons who are U.S. citizens, residents of Colorado and members of the Uniformed Services and their family members. Uniformed Services are defined as the U.S. Armed Forces, merchant marine, commissioned corps of the Public Health Service and the National Oceanic and Atmospheric Administration.

B. Registering and Requesting an Absentee Ballot

You should send an FPCA to your local election official early every year and whenever you change your mailing address (see Chapter 2).

If you are an unregistered citizen, the County Clerk and Recorder must receive your FPCA not later than 29 days before the election.

If you are a registered citizen, the County Clerk and Recorder must receive your FPCA no later than the close of business on the Friday immediately proceeding the election; if you wish to receive the absentee ballot by mail, the FPCA must be received no later than the close of business on the eleventh day before the election.

C. Casting Your Vote

Ballot Return Deadline: Voted ballot must arrive at the local elections office by 7 p.m. on election day.

Local election officials mail ballots approximately 30 days before the primary election and not later than 30 days before the general election.

If you have not received your state ballot in a timely manner, use the Federal Write-In Absentee Ballot. See instructions in Chapter 2, page 21.

D. Notary/Witness Requirements

No registration or voting materials are notarized or witnessed.

E. Electronic Transmission of FPCAs and Ballots

- Colorado allows you to fax in the FPCA to register and to request an absentee ballot, but you must mail in the original FPCA after faxing it.
- Colorado allows you to receive the blank ballot by fax.
- Colorado allows you to return the voted ballot by fax.

Please refer to Appendix B for specific instructions when transmitting election materials electronically. Use the following numbers:

DSN 223-5527 (703) 693-5527

1-800-368-8683

(from U.S., Canada, Guam, Puerto Rico, Virgin Islands only)

International toll-free fax numbers (See inside back cover)

F. Special Write-In Absentee Ballot

If you reside outside the U.S., Colorado provides a state special write-in absentee ballot if you cannot vote a regular absentee ballot during the normal absentee voting period because of military or other contingencies which preclude normal mail delivery.

This ballot is available 57 days before an election and you can use the FPCA to request it. In Block 6 of the FPCA place one of the labels from Section IV.F. or write: "I cannot vote an absentee ballot during the normal absentee voting period due to military or other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

You may vote the ballot by writing in the names of the party or specific candidates you wish to vote for.

Instructions continue in Section IV: Uniformed Services & Civilians Outside U.S.

III. CIVILIANS OUTSIDE U.S.

A. Who Can Do It

These procedures apply to persons who are U.S. citizens, residents of Colorado and overseas citizens. The term "overseas citizen" means a U.S. citizen who resides outside the U.S. and (but for such residence) would be qualified to vote in Colorado.

- civilian employees of the U.S. Government serving overseas and their spouses and dependents when residing with or accompanying them (for local, state and Federal office ballots)
- members of religious groups or welfare agencies who are officially attached to and serving with the U.S.
 Armed Forces and their spouses and dependents (for local, state and Federal office ballots)
- Colorado residents temporarily residing outside the U.S. (for local, state and Federal office ballots)
- overseas citizens (for Federal office ballots only)

B. Registering and Requesting an Absentee Ballot

You should send an FPCA to your local election official early every year and whenever you change your mailing address (see Chapter 2).

If you are an unregistered citizen, the County Clerk and Recorder must receive your FPCA not later than 29 days before the election.

If you are a registered citizen, the County Clerk and Recorder must receive your FPCA not earlier than January 1 immediately preceding the election and no later than the Friday before the election.

C. Casting Your Vote

Ballot Return Deadline: Voted ballot so that it arrives at the local elections office by 7 p.m. on election day.

Local election officials mail ballots approximately 30 days before the primary election and not later than 30 days before the general election.

If you are outside the U.S. and have not received your state ballot in a timely manner, use the Federal Write-In Absentee Ballot. See instructions in Chapter 2, page 21.

D. Notary/Witness Requirements

No registration or voting materials are notarized or witnessed.

E. Electronic Transmission of FPCAs and Ballots

- Colorado allows you to fax in the FPCA to register and to request an absentee ballot, but you must mail in the original FPCA after faxing it.
- Colorado allows you to receive the blank ballot by fax.
- Colorado allows you to return the voted ballot by fax.

Please refer to Appendix B for specific instructions when transmitting election materials electronically. Use the following numbers:

DSN 223-5527 (703) 693-5527

1-800-368-8683

(from U.S., Canada, Guam, Puerto Rico, Virgin Islands only)

International toll-free fax numbers (See inside back cover)

F. Special Write-In Absentee Ballot

If you reside outside the U.S., Colorado provides a state special write-in absentee ballot if you cannot vote a regular absentee ballot during the normal absentee voting period because of military or other contingencies which preclude normal mail delivery.

This ballot is available 57 days before an election and you can use the FPCA to request it. In Block 6 of the FPCA place one of the labels from Section IV.F. or write: "I cannot vote an absentee ballot during the normal absentee voting period due to military or other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

You may vote the ballot by writing in the names of the party or specific candidates you wish to vote for.

Instructions continue in Section IV: Uniformed Services & Civilians Outside U.S.

IV. UNIFORMED SERVICES & CIVILIANS OUTSIDE U.S.

A. Bars to Registration and Voting

Persons convicted and serving any part of their sentence in detention or confinement in a correctional facility, jail, or other location for a felony conviction or on parole may not register or vote.

B. Cancellation of Registration

All registered voters are mailed a voter information card not more than 29 days before and no more than 30 days after a primary election. These cards are non-forwardable.

Those voters whose cards are returned as undeliverable to the County Clerk and Recorder's office will be placed on the inactive list. A registered voter who fails to vote in a general election will also be placed on the inactive list. No later than 90 days after any general election, voters who are recorded as "Inactive" will be sent a voter continuance card. If the voter does not complete and return the continuance card within 60 days and if the voter has been designated "Inactive" for two general elections, then the voter's registration will be cancelled.

C. Action on Registration Requests

Within ten (10) business days after receipt of the application, the County Clerk and Recorder shall notify each applicant of the disposition of the application by nonforwardable mail.

D. Action If Registration Is Denied

Upon denial of your voter registration application or absentee ballot request, Colorado shall provide you with the reason(s) for the rejection. If registration is denied, resubmit the application, correcting any deficiencies. If a second denial is received, consult a legal assistance officer or civilian counsel.

E. Where To Send It

Mail the FPCA to the County Clerk and Recorder, county of voting residence, as listed below:

County	County Seat	Zip Code
Adams	County Clerk and Recorder 450 S. 4th Avenue, Suite 200	
	Brighton, CO	80601-3195
Alamosa	County Clerk and Recorder Box 630	
	Alamosa, CO	81101-0630
Arapahoe	County Clerk and Recorder 5334 S. Prince	
	Littleton, CO	80166-0211
Archuleta	County Clerk and Recorder Box 2589	
	Pagosa Springs, CO	81147-2589
Baca	County Clerk and Recorder	
	741 Main	
	Springfield, CO	81073-1548

County	County Seat	Zip Code
Bent	County Clerk and Recorder	-ip ooue
	Box 350	04054 0050
Boulder	Las Animas, CO County Clerk and Recorder	81054-0350
Sounder	1750 33rd Street, Suite 200	
Dan a safial d	Boulder, CO	80301-2534
Broomfield	County Clerk and Recorder 1 DesCombes Drive	
	Broomfield, CO	80020-2495
Chaffee	County Clerk and Recorder Box 699	
	Salida, CO	81202-0699
Cheyenne	County Clerk and Recorder	
	Box 567 Cheyenne Wells, CO	90910 0567
Clear Creek	County Clerk and Recorder	80810-0567
	Box 2000	
Conejos	Georgetown, CO County Clerk and Recorder	80444-2000
Conejos	Box 127	
0	Conejos, CO	81129-0127
Costilla	County Clerk and Recorder Box 308	
	San Luis, CO	81152-0308
Crowley	County Clerk and Recorder	
	631 Main Street, Suite 104 Ordway, CO	81063-1092
Custer	County Clerk and Recorder	
	Box 150	81252-0150
Delta	Westcliffe, CO County Clerk and Recorder	81252-0150
20114	501 Palmer, Suite 211	
Denver	Delta, CO	81416-1764
Denver	Denver Election Commission, 200 West 14th Avenue, Suite 100	
	Denver, CO	80204
Dolores	County Clerk and Recorder Box 58	
	Dove Creek, CO	81324-0058
Douglas	County Clerk and Recorder	
	PO Box 1360 Castle Rock, CO	80104-1360
Eagle	County Clerk and Recorder	00104 1000
_	Box 537	04004 0507
Elbert	Eagle, CO County Clerk and Recorder	81631-0537
2.50.1	Box 37	
El D	Kiowa, CO	80117-0037
El Paso	County Clerk and Recorder Box 2007	
	Colorado Springs, CO	80901-2007
Fremont	County Clerk and Recorder 615 Macon Avenue, Room 102	
	Canon City, CO	81212-3381
Garfield	County Clerk and Recorder	
	109 8th Street, Suite 200 Glenwood Springs, CO	81601-3303
Gilpin	County Clerk and Recorder	31001-0000
	Box 429	00407.0400
Grand	Central City, CO County Clerk and Recorder	80427-0429
Jianu	PO Box 120	
0 :	Hot Sulphur Springs, CO	80451-0120
Gunnison	County Clerk and Recorder 221 N. Wisconsin Street, Suite C	
	Gunnison, CO	81230-2433
Hinsdale	County Clerk and Recorder	
	Box 9 Lake City, CO	81235-0009
Huerfano	County Clerk and Recorder	2.233 3000
	401 Main Street, Suite 204	91090 2005
Jackson	Walsenburg, CO County Clerk and Recorder	81089-2085
53010011	Box 337	
loffer	Walden, CO	80480-0337
Jefferson	County Clerk and Recorder 100 Jefferson County Pkwy., Suite 2560	
	Golden, CO	80419-2560

County	County Seat	Zip Code
Kiowa	County Clerk and Recorder	Lip Code
Nowa	Box 37	04000 0007
Vit Caraan	Eads, CO	81036-0037
Kit Carson	County Clerk and Recorder Box 249	
	Burlington, CO	80807-0249
Lake	County Clerk and Recorder	
	Box 917	
L - Di-t-	Leadville, CO	80461-0917
La Plata	County Clerk and Recorder 1060 East 2nd Avenue, #134	
	Durango, CO	81301-0519
Larimer	County Clerk and Recorder	
	Box 1547	
Las Animas	Fort Collins, CO County Clerk and Recorder	80522-1547
Las Allillas	Box 115	
	Trinidad, CO	81082-0115
Lincoln	County Clerk and Recorder	
	Box 67	00004 0007
Logan	Hugo, CO County Clerk and Recorder	80821-0067
Logan	315 Main Street	
	Sterling, CO	80751-4357
Mesa	County Clerk and Recorder	
	Box 20000 Grand Junction. CO	81502-5009
Mineral	County Clerk and Recorder	01002-0009
Willicial	Box 70	
	Creede, CO	81130-0070
Moffat	County Clerk and Recorder	
	221 W. Victory Way Craig, CO	81625-2716
Montezuma	County Clerk and Recorder	01023-2710
or.iozama	109 W. Main, Room 108	
	Cortez, CO	81321-3189
Montrose	County Clerk and Recorder Box 1289	
	Montrose, CO	81402-1289
Morgan	County Clerk and Recorder	
	Box 1399	
04	Fort Morgan, CO	80701-1399
Otero	County Clerk and Recorder Box 511	
	La Junta, CO	81050-0511
Ouray	County Clerk and Recorder	
	Box C	04.407.0045
Park	Ouray, CO County Clerk and Recorder	81427-0615
I dik	Box 220	
	Fairplay, CO	80440-0220
Phillips	County Clerk and Recorder	
	221 S. Interocean Avenue Holyoke, CO	80734-1521
Pitkin	County Clerk and Recorder	00701 1021
	530 E. Main Street, Suite 101	
_	Aspen, CO	81611-1948
Prowers	County Clerk and Recorder 301 S. Main Street, Suite. 210	
	Lamar, CO	81052-2868
Pueblo	County Clerk and Recorder	
	Box 878	
Die Dler	Pueblo, CO	81002-0878
Rio Blanco	County Clerk and Recorder Box 1067	
	Meeker, CO	81641-1067
Rio Grande	County Clerk and Recorder	
	Box 160	04400 0400
Pout	Del Norte, CO	81132-0160
Routt	County Clerk and Recorder Box 773599	
	Steamboat Springs, CO	80477-3599

County	County Seat	Zip Code
Saguache	County Clerk and Recorder	
	Box 176	
	Saguache, CO	81149-0176
San Juan	County Clerk and Recorder Box 466	
	Silverton, CO	81433-0466
San Miguel	County Clerk and Recorder Box 548	
	Telluride, CO	81435-0548
Sedgwick	County Clerk and Recorder 315 Cedar Street, Ste 220	
	Julesburg, CO	80737-1563
Summit	County Clerk and Recorder Box 1538	
	Breckenridge, CO	80424-1538
Teller	County Clerk and Recorder Box 1010	
	Cripple Creek, CO	80813-1010
Washington	County Clerk and Recorder Box L	
	Akron, CO	80720-1553
Weld	County Clerk and Recorder Box 459	
	Greeley, CO	80632-0459
Yuma	County Clerk and Recorder 310 Ash Street, Suite F	
	Wray, CO	80758-1850

Make Your Mark...Vote, For America

by Captain Robert McCabe, USAF

F. STATE SPECIAL WRITE-IN LABLES

If needed, place one of the following stick-on labels in Block 6 of the FPCA:

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO
"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO
"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO
"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO
"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."

COLORADO

"I cannot vote an absentee ballot during the normal absentee voting period due to military and other contingencies that preclude normal mail delivery (specify reasons). I request a special absentee ballot."